

Please type a plus sign (+) inside this box ☐

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

0010/PTO Rev. 6/95 U.S. Department of Commerce Patent and Trademark Office DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing	Attorney Docket Number	960296.97257
	First Named Inventor	Triplett
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	herewith
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

BACTERIAL INOCULANTS FOR ENHANCING PLANT GROWTH

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Additional foreign applications numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional
60/251,137	12/04/00	

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

QBMA01\311101

DECLARATION

Page 2

I hereby claim benefit under Title 35, United States Code §120 of any United States application(s), or §365(C) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT international application in the manner provided in the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and all continuation and divisional applications based thereon, and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name Customer Number or label
OR
☒ List attorney(s) and/or agent(s) name and registration number below

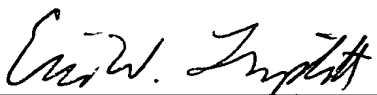
Name	Registration Number	Name	Registration Number
Herbert W. Mylius	24,578	Bennett J. Berson	37,094
Barry E. Sammons	25,608	Michael A. Jaskolski	37,551
Charles W. Jirauch	26,186	Richard T. Roche	38,599
Nicholas J. Seay	27,386	Terri S. Flynn	41,756
George E. Haas	27,642	John T. Pienkos	42,997
Michael J. McGovern	28,326	Daniel G. Radler	43,028
Carl R. Schwartz	29,437	Gregory M. Smith	43,136
Keith M. Baxter	31,233	Steven J. Wietrzny	44,402
John D. Franzini	31,356	Paul D. Amrozowicz	45,264
Janine R. Novatt	32,593	David M. Kettner	45,598
Jean C. Baker	35,433	Adam J. Forman	46,707
David G. Ryser	36,407	Zhibin Ren	47,897

☐ Additional attorney(s) and/or agents named on a supplemental priority sheet attached hereto

Please direct all correspondence to ☐ Customer Number or label OR ☒ Fill in correspondence address below

Name	David M. Kettner		
Address	Quarles & Brady LLP		
Address	P O Box 2113		
City	Madison	State	WI
Zip	53701-2113		
Country	US	Telephone	608/251-5000
Fax	608/251-9166		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 101 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Name of Sole or First Inventor:		A petition has been filed for this unsigned inventor	
Given Name	Eric	Middle Initial	W.
Family Name	Triplett		Suffix e.g. Jr.
Inventor's Signature			Date
Residence: City		Middleton	State
WI		Country	US
Citizenship		US	
Post Office Address	4323 Rock Crest Road		
Post Office Address			
City	Middleton	State	WI
Zip	53562	Country	US
Applicant Authority			

☐ Additional inventors are being named on supplemental sheet(s) attached hereto

Please type a plus sign (+) inside this box ☐

DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name	Shawn	Middle Initial	M.	Family Name	Kaeppler	Suffix e.g. Jr.	
Inventor's Signature	<i>Shawn Kaeppler</i>					Date	11/29/01
Residence: City	Oregon	State	WI	Country	US	Citizenship	US
Post Office Address	5290 County Highway A						
Post Office Address							
City	Oregon	State	WI	Zip	53575	Country	US
						Applicant	

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name	Marisa	Middle Initial	K.	Family Name	Chelius	Suffix e.g. Jr.	
Inventor's Signature	Given Name					Date	
Residence: City	Greeley	State	CO	Country	US	Citizenship	US
Post Office Address	1601 Sixth Street						
Post Office Address							
City	Greeley	State	CO	Zip	80631	Country	US
						Applicant	

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
						Applicant	

Name of Additional Joint Inventor, if any:

A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
						Applicant	

Additional inventors are being named on supplemental sheet(s) attached hereto

RECEIVED 11/29/01

Please type a plus sign (+) inside this box ☐

DECLARATION										ADDITIONAL INVENTOR(S)											
Inventor, if any:										A petition has been filed for this unnamed inventor											
First Name	Shawn				Last Name	Mcoppler				First Name					Last Name						
Inventor's Signature											Date										
Residence: City	Oregon				State	WI				Country	US				Citizenship	US					
Post Office Address	5290 County Highway A																				
Post Office Address																					
City	Oregon				State	WI				Zip	53575				Country	US					
Inventor, if any:										A petition has been filed for this unnamed inventor											
First Name	Marisa				Last Name	Chelius				First Name					Last Name						
Inventor's Signature	<i>Marisa Chelius</i>										Date	11/30/01									
Residence: City	Greeley				State	CO				Country	US				Citizenship	US					
Post Office Address	1801 Sixth Street																				
Post Office Address																					
City	Greeley				State	CO				Zip	80631				Country	US					
Name of Additional Joint Inventor, if any:										A petition has been filed for this unnamed inventor											
First Name					Last Name					First Name					Last Name						
Inventor's Signature											Date										
Residence: City					State					Country					Citizenship						
Post Office Address																					
Post Office Address																					
City					State					Zip					Country						
Name of Additional Joint Inventor, if any:										A petition has been filed for this unnamed inventor											
First Name					Last Name					First Name					Last Name						
Inventor's Signature											Date										
Residence: City					State					Country					Citizenship						
Post Office Address																					
Post Office Address																					
City					State					Zip					Country						
Additional inventors are being named on supplemental sheet(s) attached herein																					

FOOTNOTES